

FINANCIAL AFFIDAVIT

IN SUPPORT OF REQUEST FOR DEFENDANT'S EXTRADITION OR OTHER COURT SERVICES WITHOUT THE AGREEMENT OF THE GOVERNMENT OF THE UNITED STATES

IN UNITED STATES MAGISTRATE DISTRICT APPEALS COURT or OTHER PANEL (Specify below)

IN THE CASE OF

U.S. V.S.
Marie Calabro

FOR

Massachusetts

AT

Boston

LOCATION NUMBER

PERSON REPRESENTED (Show your full name)

Marie Calabro

CHARGE/OFFENSE (describe if applicable & check box →)

 Felony Misdemeanor

Theft of Mail

- 1 Defendant—Adult
 2 Defendant - Juvenile
 3 Appellant
 4 Probation Violator
 5 Parole Violator
 6 Habeas Petitioner
 7 2255 Petitioner
 8 Material Witness
 9 Other

DOCKET NUMBERS
Magistrate
District Court
104-10265
Court of Appeals

EMPLOY- MENT	Are you now employed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Am Self-Employed			
	Name and address of employer:			
	IF YES, how much do you earn per month? \$ _____	IF NO, give month and year of last employment How much did you earn per month? \$ _____		
ASSETS	If married is your Spouse employed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	IF YES, how much does your Spouse earn per month? \$ _____	If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$ _____		
	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input type="checkbox"/> Yes <input type="checkbox"/> No			
OTHER INCOME	RECEIVED IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY THE SOURCES	SOURCES \$ 22,000 from the savings plan to \$ 500/week for job left job in 3/04		
	CASH	Have you any cash on hand or money in savings or checking accounts? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No IF YES, state total amount \$ 150		
	PROPERTY	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
OBLIGATIONS & DEBTS	VALUE IF YES, GIVE THE VALUE AND \$ 12000 DESCRIBE IT	DESCRIPTION car over the amount owed on the car		
	DEPENDENTS	MARITAL STATUS <input checked="" type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> SEPARATED OR <input type="checkbox"/> DIVORCED	Total No. of Dependents 1	List persons you actually support and your relationship to them
		APARTMENT OR HOME: credit card WEMC	Creditors	Total Debt \$ 6000 \$ 400 \$ \$ \$ \$
DEBTS & MONTHLY BILLS (LIST ALL CREDITORS, INCLUDING BANKS, LOAN COMPANIES, CHARGE ACCOUNTS, ETC.)		Monthly Pay \$ \$ \$ \$ \$ \$		

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date)

10/13/04

SIGNATURE OF DEFENDANT
(OR PERSON REPRESENTED)

Marie Calabro